

Patient and Family Education

Policy and Procedure



Manual

For

Red Lake Hospital
Red Lake, Minnesota
56671

PATIENT EDUCATION

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I. INTRODUCTION

- A. The need for improved communications between the health-care provider, patient, and family has grown. Most patients and family members fail to remember the information their health-care provider has told them. This manual will help assure a higher quality of health care in addition to permitting a more effective use of the health-care provider's limited time.
- B. The goal of educating the patient and/or family is to improve patient health outcomes by promoting recovery, speeding return to function, promoting healthy behavior, and involving the patient in his or her care decisions. We have understood all along that patient satisfaction is important. In today's competitive environment, the happiness of our patient can make the difference in the success of our patient education programs.

VISION STATEMENT

A healthy Red Lake Chippewa community.

III. MISSION STATEMENT

The Red Lake Hospital Patient Education Program's goal is to elevate the health status of our Native American community to the highest level possible, by empowering our clients to actively participate in their health care decisions. This interdisciplinary, collaborative, culturally specific program exists to ensure that each client's individualized learning experience promotes autonomy, fosters respect and facilitates self-determination of health-related goals. The patient education program will be designed to emphasize health promotion/disease prevention, enhance family/individual coping with changes related to illness and reinforce goal-directed health behavior

IV. PHILOSOPHY OF PATIENT EDUCATION

- A. The philosophy of patient education at Red Lake Hospital is based on the belief that the patient should receive the best care possible. Red lake Hospital believes Patient Education is an integral part of quality patient care.
- B. It is our belief that the coordinated professional team approach is essential in providing information to patients and their families. While patient education is the responsibility of the total professional team,

it is also the right of the individual patient and his or her family. A desired outcome of a deliberate, systematic patient education program is a patient who is knowledgeable about his or her health problem(s) and is able to participate in his/her continued self-care following discharge.

C. We further believe that:

- Patient Education programs developed should be able to be individualized and revised according to a patient's learning and functional needs.
- Patient Education should be a deliberate planned effort rather than an intuitive, random one.
- Patients Education programs, which are planned, can result in improved patient care and better utilization of hospital professional staff and resources.
- Patient Education programs should determine needs and objectives of each department so that a multidisciplinary approach to patient education can be developed.
- The key concepts presented in Patient Education should include not only the patient but also the patient's family and significant others. Involving the patient's significant others in the education process should enhance the health care experience; ensuring the patient and the family receive maximum benefit from the health care interventions provided by Red Lake Hospital.
- Patient Education must be relevant to the culture and environment of the consumer.

D. The core values established to enhance our organization are:

- To help the Hospital and the community work together as a team.
- To be responsive to the needs of the community.
- To realize patient education programs enhance the quality of life and maintain that balance of commitment, and
- To develop pride in belonging to this organization that promotes patient and family education awareness.

Definition of Patient Education

Patient and family education is a planned, problem-solving process that gives the patients and the families information that they need about their health or medical problem that helps them to make informed decisions about their care. This process empowers the patient to identify their needs and assists in

Clarifying their responsibilities for continuous good health care. Patient and family education programs involve an initial assessment, specific content of teaching, documentation of teaching and progress, and evaluation of teaching.

IMPORTANCE OF PATIENT EDUCATION

- A. Individuals must assume a pro-active role in the maintenance and/or improvement of their own health.
- B. As morbidity becomes more the result of unhealthy choices in life style behavior, self – generated positive health practices become imperative for supporting an increased life span and improved quality of life.
- C. A planned program can result in:
 - Quality care.
 - Improved utilization of hospital/clinic services.
 - Fewer clinic visits, fewer re-admissions to inpatient facilities, and shorter length of stay.
 - Increased community support for the Tribal Health Program because clients feel that the health staff is interested in their healthy and well being.
 - Increased staff communication and satisfaction.
 - Support of indicators to meet the accreditation standards for our organization.
 - Commitment to the development of written policy and procedure manual for patient education really means making a commitment to the Native American population one deliver services to.

IV. PURPOSE

- A. To provide guidance to health care providers within the hospital's inpatient, outpatient and support Services to achieve the standards outlined in the philosophy statement of the Red Lake Hospital Patient Education Committee.
- B. To try and eliminate the random, unplanned teaching of patients by giving a specific content of an organized teaching program geared to the needs of the individual patient.
- C. To identify a consistent method for assessing, evaluating and documenting educational activities.
- D. To provide planned educational experiences as an integral part of patient care. Through patient education the patient and family will be assisted in acquiring the knowledge, attitudes and skills necessary to understand and participate in the continued management of their health wellness and to function as independently as possible.
- E. To facilitate enhanced intra- and interdisciplinary communication.
- F. To assess the patients' learning needs, abilities, preferences, potential barriers to learning and readiness to learn.
- G. To promote interdisciplinary patient teaching programs guidelines, and instructions.

- H. To encourage the balanced growth of the community we serve.
- I. To respond effectively to the needs of the community.
- J. To foster and maintain high quality standards in the organization

V. OBJECTIVES

A. The Patient Education Program will:

- Facilitate orientation for the patient, their families and significant others to the clinic/hospital and its services.
- Provide structured educational activities relevant to the learning needs of the patients (and/or families) with specific health problems and for promotion of wellness.
- Include in the focus of patient teaching a plan for health maintenance and disease prevention.
- Assist the staff in identifying the learning needs of the patient and in acquiring the knowledge and skills necessary to perform their function as patient educators.
- Facilitate the team approach to Patient Education, through team conferences, formulation of nursing care plans, utilization of checklists and coordination with other health personnel.
- A standard of care for each educational session will be developed which stipulates the minimum level of teaching that will be offered for each education encounter. From this minimum standard, care can be individualized to meet the specific needs and wants of the patient.
- Provide for continuity of care through discharge planning.
- Develop a teaching module method of patient education using goals and behavioral objectives that can then be used as criteria for evaluation.
- Create and/or identify and review commercial educational materials for use in the program.
- Assist in the organization and implementation of self-help groups (Fitness Club/Walking Group, Nutrition/Diet Group, Diabetes Association, etc.) which can aid in the physical and psychosocial rehabilitation of the patient.
- Assess and evaluate the effectiveness of patient education programs in meeting the learning needs of the patient, his family, and his community.

VI. ORGANIZATION AND RESPONSIBILITIES

A. The Patient Education Committee will:

- Solicit and receive requests for new health education programs, determines their priority, and make recommendations for their development, review and approval of the final programs.
- Receive, review and prioritize requests for allocation of resources and materials necessary to fulfill the goals and objectives of client and family health education activities. Funding requests are considered annually during resource allocation at the organizational level.
- Facilitates the networking within the organization, between all the disciplines to insure the optimal utilization of available resources and consistency of materials used.
- Establishes a health education documentation process for providers that reflect levels of client/family understanding.
- Establishes and monitors measures of performance for the patient education function.
- Establishes performance improvement priorities and coordinates multi-disciplinary improvement efforts.

B. The Patient Education Coordinator will:

- Facilitates the regularly scheduled Patient Education Committee meetings
- Develops community-appropriate patient education materials as needed
- Maintain adequate meeting minutes, files and documentation as required by accrediting agencies
- Orient new employees of the patient education process at Red Lake Hospital and their roles in that process.
- Represent Red Lake Hospital to outside organizations with regards to patient education.
- Implement the Patient Education Committee's mission and objectives throughout the hospital/clinic and community.
- Provide status of patient education to hospital administrators annually.

C. The Multi-Disciplinary Health Care Provider(s) will:

- All staff members, both clinical and non-clinical, play a role in patient education

- Those departments that have *direct contact* with patients are for example: Medicine, Nursing, Social Services, Dietary, Pharmacy, CHT's, Alcohol and Substance Abuse Counselor, Nutritionist, Dental staff, Health Educator, Diabetes Coordinators, Physical Therapist and Discharge Planner.
- Other departments will assist with gathering, disseminating and documenting information as to the current status of patient education
- An orientation meeting for all staff will be held. Annual general staff meetings will be held to clarify the facility's vision, mission, goals and objectives as they pertain to patient education policies and procedures
- Review structure of health education programs for related materials and make recommendations for revisions as necessary.
- Facilitate collaboration regarding content/subject input from the various disciplines when reviewing health education programs.
- Establish and implement mechanisms by which to survey patient and staff to determine client/family health educational needs.
- Provide health education to clients/families in a manner, which recognizes and addresses their cultural and spiritual needs.

D. The Client(s) will:

- Provide to the best of their knowledge, information regarding their health status to the health care provider.
- Ask questions when they do not understand the information provided by the health care provider.
- Follow the instructions outlined in the treatment plan or voice concerns about the ability to follow recommendations of the health care provider.
- Accept the consequences of not following the instructions
- Follow hospital rules and regulations concerning patient care and conduct.
- Act with consideration and respect of other clients with respect to medical center equipment, personal property and unnecessary noise or distractions.

VII. Documentation

- A. All formal patient education will be documented on a PCC form – an Ambulatory Encounter Form, Emergency Record, Education Flow Sheet or Inpatient Supplement.
- In-patient – Documentation of inpatient education will be on the “PCC Inpatient Supplement and Discharge Follow-up Recommendations, Specific Instructions, etc.”
 - Out-patient – Documentation of out-patient education will be on the “PCC Ambulatory Encounter Record” in the area labeled “medications/treatments/procedures/patient education”
 - Emergency Department – Documentation of patient education in the Emergency Department will be on the “PCC Emergency Visit Record” in the area at the bottom of the sheet labeled “Instructions to Patient/Family”